

\_\_\_\_\_ thru \_\_\_\_\_  
 \_\_\_\_\_ thru \_\_\_\_\_

## Application for Vehicle Manufacturer Plate

Business Name		Michigan Business Street Address		
City	County	State <b>MI</b>	Zip Code	Daytime Phone Number ( )
Global Business Name		Global Business Street Address		
City	County	State	Zip Code	Daytime Phone Number ( )
FEIN	Business Representative Contact (Please Print)			Daytime Phone Number ( )

Check one: ☐ Original plate☐ Replacement plate \*☐ Renew plate \*

\* attach renewal notices and a list of plates being renewed or replaced

<p><b>VEHICLE MANUFACTURER PLATE</b> (valid for three years)</p> <p>Fee: \$30 for each plate</p> <p>No. requested: _____ x \$30 = _____  <div style="text-align: right;">Total Fee</div></p>	<p>Manufacturer license plates may be issued to persons, firms, corporations, or associations that manufacture new motor vehicles, trailers, trailer coaches, or semi-trailers as a regular business. Manufacturer plates can also be issued to the producer of a vehicle subcomponent system essential to the operation of the vehicle or to the safety of an occupant, and to a manufacturer of automated technology or automated vehicles. Applicants must have a business presence in Michigan with a Michigan address.</p> <p>The manufacturer must keep a written record of when the plate is used on a particular vehicle, available for inspection by law enforcement.</p> <p>Proof of Michigan no-fault insurance for all <b><u>owned and non-owned</u></b> vehicles must be submitted.</p>
Make and type of vehicle manufactured:	
<input type="checkbox"/> Subcomponent Manufacturer	Description of the manufactured Subcomponent System:
<input type="checkbox"/> Automated Vehicle Manufacturer	Make and type of automated vehicle(s) manufactured:
<input type="checkbox"/> Automated Technology Manufacturer	Description of automated technology manufactured:

**I certify I am eligible for the Manufacturer plates requested and that they will only be used as noted above.**

Signature <b>X</b>		Printed Name	Date
Title	Driver's License Number	Email Address	

**The Michigan Department of State reserves the right to determine the number of Manufacturer plates that may be issued to a qualifying entity.**

Return this completed application, proof of insurance as described above, and check or money order payable to the **State of Michigan** to any Secretary of State branch office or to:

Michigan Department of State  
 Renewal by Mail Unit  
 Lansing, MI 48918